PTO/SB/06 (08-03)
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FOR E .18(a)) AIMB .18(o)) DENT CLAIMS	AIMS AS FII (Column	1)	(Colum	nn 2)	SMALL EI	IFITY	OR		
E .16(a)) .AMS .18(o)) DENT CLAIMS		FILED	NUMBER		SMALL ENTITY			OTHER THAN SMALL ENTITY	
.16(a)) .AMS .18(o)) DENT CLAIMS	m		ER FILED NUMBER EX		RATE	FEE		RATE	FEE
AIMS .18(0)) DENT CLAIMS							OR		<u> </u>
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.18(D))			1				l i		
OFR 1.19(b)) minus 3 = 4					X \$		OR	X	
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'If the difference in column 1 is less than zero, enter "0" in column 2.					TOTAL		OR:	TOTAL	<u>.</u>
CLAI	MS AS AMEN	NDED - I	PART II	rcc				•	
INI	Column 1)		(Column 2)	(Column 3)	J	:NTITY	OR	OTHER	
1	CLAIMS		HIGHEST				1		<u> </u>
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Independent (37 CFR l.16(b))	•	Minus	•••	-	1				
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"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO:. Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.